Express Mail No.: EV336656905US

JC14 Rec'd PCT/PTO 12 MAY 2005

APPLICATION DATA SHEET

Secrecy Order in Parent Appl.?::

| Application Information | • |
|----------------------------------|------------------------------|
| Application number:: | |
| Filing Date:: | |
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of copies of CDs:: | |
| Sequence submission?:: | |
| Computer Readable Form (CRF)?:: | No |
| Number of copies of CRF:: | |
| Title :: | PROPORTIONING, REGENERATIVE, |
| | ROTARY PUMP |
| Attorney Docket Number:: | 410106.403USPC |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 2 |
| Small Entity?:: | Yes |
| Petition included?:: | No |
| Petition Type:: | |
| Licensed U.S. Gov't Agency:: | |
| Contract or Grant No:: | |

No

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First Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Buddy

Middle Name:: Don

Family Name:: Gray

Name Suffix::

City of Residence:: Dellrose

State or Province of Residence:: TN

Country of Residence:: US

Street of mailing address:: 121 Bee Springs Road

City of mailing address:: Dellrose

State or Province of mailing address:: TN

Country of mailing address:: US

Postal or Zip Code of mailing address:: 38453

Correspondence Information

Correspondence Customer Number :: 00500

Representative Information

| Representative Customer Number:: | | 00500 |
|----------------------------------|--|-------|
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Domestic Priority Information

| Application :: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|---|----------------------|----------------------|
| This Application | National Stage of | PCT/US03/036427 | 11/12/03 |
| PCT/US03/036427 | An application claiming the benefit under 35 USC 119(e) | 60/426,768 | 11/14/02 |

Foreign Priority Information

| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
| | | | |

Assignee Information

| Assignee name:: | |
|---|--|
| Street of mailing address:: | |
| City of mailing address:: | |
| State or Province of mailing address:: | |
| Country of mailing address:: | |
| Postal or Zip Code of mailing address:: | |

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